

NEW JERSEY EMS VEHICLE OPERATIONS/SAFETY GUIDELINES

Applicability:

- A. All Emergency Medical Services (EMS) incident responses and patient transports. Including all licensed, volunteer, municipal, non-licensed, non-affiliated, fire, first aid, rescue, hospital or corporate, etc. agency and/or its' agents.

Background:

1. In most instances the use of Emergency Warning Devices (EWD) has not been shown to significantly decrease transport times.
2. The vast majority of patients will not have better medical outcomes by decreasing transport time by the time saved by EWD transport.
3. The patient's physiologic responses to EWD use (increased tachycardia and blood pressure) may be detrimental to some patient's medical conditions.
4. The increased risk of EMS vehicle crash while using EWD may increase the risk of injury to EMS providers.
5. EMS patient care providers who are not restrained in a moving ambulance are at greater risk of serious injury and death.
6. The extremely poor prognosis for patients transported with CPR in progress does not justify the use of EWD for transport of most patients in cardiac arrest.

System Requirements:

- A. These guidelines provide general information and best practices related to the use of EWD by EMS providers and their EMS Vehicle Operators (EMSVO) during incident response and patient transport.

Applicable State Law:

NJSA 39:1-1. As used in this subtitle, unless other meaning is clearly apparent from the language or context, or unless inconsistent with the manifest intention of the Legislature:

"Authorized emergency vehicles " means vehicles of the fire department, police vehicles and such ambulances and other vehicles as are approved by the chief administrator when operated in response to an emergency call.

NJSA 39:4-91 Right of way of emergency vehicles; liability of drivers:

- a. The driver of a vehicle upon a highway shall yield the right of way to any authorized emergency vehicle when it is operated on official business, or in the exercise of the driver's profession or calling, in response to an emergency call or in the pursuit of an actual or suspected violator of the law and when an audible signal by bell, siren, exhaust whistle or other means is sounded from the authorized emergency vehicle and when the authorized emergency vehicle, except a police vehicle, is equipped with at least one lighted lamp displaying a red light visible under normal atmospheric conditions from a distance of at least five hundred feet to the front of the vehicle.

- b. This section shall not relieve the driver of any authorized emergency vehicle from the duty to drive with due regard for the safety of all persons, nor shall it protect the driver from the consequences of his reckless disregard for the safety of others. Nothing in this section shall be construed to limit any immunity or defense otherwise provided by law.***

Amended 1951, c.23, s.49; 1997, c.423, s.1.

NJSA 39:4-92. Authorized emergency vehicles; clearance for; following or parking near:

Upon the immediate approach of an authorized emergency vehicle giving audible signal, and equipped, as required by section 39:4-91 of this Title, and unless otherwise directed by a police or traffic officer,

- a. The driver of every vehicle shall immediately drive to a position as near as possible and parallel to the right-hand edge or curb of the highway, clear of an intersection of highways, and shall stop and remain in that position until the authorized emergency vehicle has passed and
- b. The driver or person in control of a street car shall immediately stop the car clear of an intersection of highways and keep it stationary until the authorized emergency vehicle has passed.

Policy:

A. Use of visual and audible Emergency Warning Devices:

- a. "Emergency Warning Devices" are defined as:
 - i. Any flashing, rotating or oscillating light visible at a distance of 10' or greater from the vehicle, under normal operating conditions, except the OEM turn and/or hazard flashers provided by the vehicle manufacturer; and
 - ii. Any electronic or mechanical acoustic device emitting sounds audible at a distance of 10' or greater from the vehicle, under normal operating conditions, except the OEM horn provided by the vehicle manufacturer
- b. EMS vehicle should not use EWD, unless they do so while responding to a call or transporting a patient who presents, or is in good faith perceived to present, a combination of circumstances resulting in a need for **immediate** medical intervention.
- c. When transporting the patient, the need for immediate medical intervention must be beyond the capabilities of the EMS providers using available supplies and equipment. It is important to note that many patients require emergency on scene assessment and treatment, but transport to the hospital may be most appropriately and safely accomplished by EMS personnel without the use of EWD.

- 1. "Sterile Cockpit" best practices should be utilized including:

- a. no unnecessary/non-mission conversation.
 - b. Zero tolerance for driver:
 - i. cell phone use
 - ii. viewing pager
 - iii. texting
 - c. Co-pilot assists with:
 - i. radio
 - ii. navigation
 - iii. watching traffic
2. EWD should be used when exercising any moving privilege (examples include, proceeding through a red light or stop sign after coming to a complete stop or opposing traffic in an opposing lane or one-way street) granted to EMS vehicles that are responding or transporting in an emergency mode.
 3. Agencies should consider a policy requiring notification of the supervisor before any EWD transport.

B. Response to incident:

1. The EMSVO is responsible for the mode of response to the scene based upon information available at dispatch.
 - a. If the PSAP or dispatch center provides a response category based upon EMD criteria, EMS vehicles shall respond with EWD only when the dispatch category is consistent with an Emergency Warning Device response.
2. Response mode may be altered based upon additional information that is received by the dispatch center while the EMS vehicle is en-route to scene.
3. EWD use is generally NOT appropriate in the following circumstances:
 - a. Stand-bys for non-emergent or pre-planned events.
 - b. Carbon monoxide detector alarm activations without the report of any ill persons at the scene.
 - c. Assist to another public safety agency when there is no immediate danger to life or health.
 - d. Response to a hospital for non-emergent inter-facility transport.
 - e. Response to a medical alarm system activation when available information indicates no immediate danger to life or health.
 - f. Response to patients who have apparently expired.
4. Responding to MVCs with no known injuries:
 - a. Special circumstances may justify EWD use to an emergency incident scene when the emergency vehicle is not transporting a crew for the purposes of caring for a patient; e.g. Transportation of personnel or material resources considered critical or essential to the management of an emergency incident scene. Transportation of human or material resources considered critical or essential to the prevention or treatment of acute illness/injury at a medical facility or other location at which such a circumstance may occur (i.e. transportation of an amputated limb, organ retrieval, etc.).

C. Patient transport:

1. The EMS provider primarily responsible for patient care during transportation shall determine the appropriate mode of transportation based upon the medical condition of the patient.
2. In most situations, the use of EWD during patient transport is not indicated except:
 - a. Emergent transport should be used in any situation in which the EMS provider primarily responsible for patient care believes that the patient's condition will be worsened by a delay equivalent to the time that can be gained by emergent transport.
 - b. The justification for using this criterion should be documented on the patient care report.
 - c. Examples of medical conditions that may benefit by EWD transport:
 1. Inability to obtain or maintain a patent airway
 2. Critically unstable patient
3. No EWD will be used when ALS care is not indicated (for example, ALS cancelled by BLS or ALS releases to BLS).
4. Mode of transport for inter-facility transfers will be based upon the medical protocol and the provider primarily responsible for patient care during the transport.
 - a. Generally, inter-facility transport patients have been stabilized to a point where the minimal time saved by EWD transport is not of importance to patient outcome.

D. Other operational safety considerations:

1. The following procedures should be followed for safe EMS vehicle operations:
 - a. Seatbelts must be utilized by all occupants.
 - i. Patient care providers should minimize the time they are unrestrained in the back of the ambulance.
 - b. All cots must be equipped with the OEM restraint system, including shoulder harness.
 - i. Every patient should be secured using the entire restraint system, including the shoulder harness.
 - c. All EMS, ambulance, and transport services are urged to develop a policy, and institute regular training on the proper use of cot restraint systems.
 - d. All portable equipment, including monitor/defibrillators, oxygen tanks, etc. must be secured with a seatbelt, strap or other appropriate device at all times that the ambulance is in motion.
2. The following procedures should be followed for safe EMS scene operations:
 - a. High visibility clothing should be worn at all times when operating on any surface that a motor vehicle can travel.

- b. EWD should be utilized whenever an emergency vehicle is obstructing or blocking the roadway.
- c. If the emergency vehicle is parked out of the line of traffic and not causing an obstruction the use of EWD should be limited to situational necessity.

E. Fatigued Driving:

1. Agency/Departmental policies should be developed addressing Shifts/ Duty Hour Limits

F. PSAP and Dispatch Centers:

1. EMS systems are encouraged to cooperate with the dispatch centers in developing procedures to downgrade the response of incoming units to Non-EWD when initial on-scene units determine that there is no immediate threat to life.

G. Documentation:

1. The dispatch category (e.g., ALS emergency) that justifies EWD response should be documented on the patient care report.
2. The justification for using EWD during transport should also be documented on the patient care report (e.g., gunshot wound to the abdomen, systolic BP<90, etc.).

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